

**TRANSMITTAL
FORM**

OCT 20 2006 PATENT & TRADEMARK OFFICE	Application Serial Number	10/664,408
	Filing Date	September 17, 2003
	First Named Inventor	Sanders
	Group Art Unit	1745
	Examiner Name	Mercado
	Attorney Docket No.	NAS-001
	Patent No.	Not applicable
	Issue Date	Not applicable

ENCLOSURES (check all that apply)

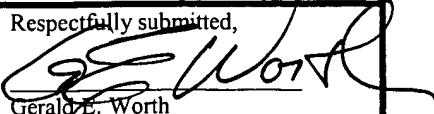
<input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input type="checkbox"/> Check Attached <input checked="" type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] <input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input checked="" type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance	<input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <input type="checkbox"/> Certificate of Correction (in duplicate) <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)	
			<input checked="" type="checkbox"/> Check Attached
			<input checked="" type="checkbox"/> Copy of Fee Transmittal Form
			<input type="checkbox"/> Preliminary
			<input type="checkbox"/> After Final
			<input type="checkbox"/> Affidavits/declaration(s)
			<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]
			<input type="checkbox"/> Petition for Extension of Time
			<input type="checkbox"/> Form PTO-1449
			<input type="checkbox"/> Copies of IDS Citations
<input type="checkbox"/> Certified Copy of Priority Document(s)			
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above 			

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Respectfully submitted,

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